

INSTRUCTIONS FOR OBTAINING A LICENSE

These instructions pertain only to your restaurant license. If you plan to serve alcohol, please inquire about an alcohol license application

You will need a City of Eau Claire Restaurant license and a Health Department license. Contact the Health Department at 715-839-4718 to determine the type of Health Department license needed.
Contact the Licensing Specialist at 715-839-4923 for the License application.
Submit a copy of your seller's permit from the State of Wisconsin; this is a 15 digit number starting with 456-xxxxxxxxxxxxxx.
Pay applicable license fee(s). The license period is July 1 to June 30. Fees are non-refundable and most fees are not prorated.
Schedule inspections and obtain signatures from inspectors: o Health Department (715-839-4718) o Fire Inspector (715-839-4825) o Electrical Inspector, Building Inspector, Plumbing Inspector (715-839-4947) Applicant must contact the inspectors AT LEAST 3 DAYS IN ADVANCE to schedule inspections and obtain signatures.
After you have obtained signatures from all inspectors, return the form to the Licensing Specialist to obtain your licenses.
tions? Contact the Licensing Specialist at 715-839-4923 or via email at sing@eauclairewi.gov
Mail or bring application with payment to: Licensing, City of Eau Claire 203 S Farwell St. PO Box 909 Eau Claire WI 54702-0909

Phone: 715-839-4923 Fax: 715-839-3889

2014 - 201	5 CITY OF EA	U CLAIRE	UNIFOR	M LICEN	SE APPLI	CATION			
Check one - Individual	• Part	nership	• Cor	poration	•	Other:			
egal owner of business: SELLERS PERMIT NUMBER:									
Trade name of business:	•								
Address of business:									
Mailing address:									
Name of Applicant:	Date:			Bus. Pho	ne:				
Tame of Approach	CITY OF EAU CLAIRE LICENSE FEES								
LICENSE TYPE	DESC	QTY				CODE	FEE	TOTAL	
PUBLICATION FEE						1130	\$40new/\$20ren		
COMBINATION CLASS B	prorated					1111	\$ 600.00		
RESERVE CLASS B	1st year only					1112	\$ 11,500.00		
COMBINATION CLASS A	prorated					1113	\$ 766.00		
CLASS A BEER	prorated					1115	\$ 266.00		
CLASS B BEER	prorated					1116	\$ 100.00		
CLASS A LIQUOR	prorated					1124	\$ 500.00		
CLASS C WINE	prorated					1114	\$ 100.00		
CLASS A CABARET	live music/dancing					1317	\$ 206.00		
CLASS B CABARET	live music					1317	\$ 146.00		
CHGES CL A/B CABARET						1317	\$ 36.00		
CIGARETTE Circle One: OTC VI	и вотн					1315	\$ 100.00		
AMUSEMENT DEVICE	per/device		(Only Electrica	l inspection req	uired)	1316	\$ 50.00		
POOL TABLE	per/table					1357	\$ 31.00		
CITY RESTAURANT						1312	\$ 117.00		
CITY RESTAURANT/LTD						1311	\$ 60.00		
ROOM TAX PERMIT APPLICATION FEE						2425	\$ 67.00		
OTHER LICENSE FEE	LICENSE TYPE:	I							
Н	EALTH DEPAR								
l		PLAN REV	PLAN		PRE-INSP		LICENSE		
LICENSE TYPE	DESC	CODE	REV FEE	CODE	FEE	CODE	FEE		
ADDITIONAL LOCATION	per/facility			5135	\$110.00		\$ 135.00		
BEVERAGE EST		5144	\$55.00	5136	\$55.00		\$ 209.00		
HEATLH LTD REST		5138	\$55.00		\$55.00		\$ 238.00		
HEALTH REST - A	<100,000	5139	\$75.00			5112/5113/5114	\$ 509.00		
HEALTH REST - B	100,000-499,999	5140	\$100.00		·	5105/5101/5102	·		
HEALTH REST - C	500,000-999,999	5141	\$125.00		·	5106/5103/5104	\$ 712.00		
HEALTH REST - D	>1,000,000	5142	\$150.00	5134	\$165.00	5107/5108/5109	<u> </u>		
		Total		Total		Total Plan/Pre-	insp		

HEALTH DEPARTMENT RETAIL FOOD LICENSE FEES								
		PLAN REV	PLAN	PRE-INSP	PRE-INSP	LIC CHGE	LICENSE	
LICENSE TYPE	DESC	CODE	REV FEE	CODE	FEE	CODE	FEE	
RETAIL FOOD - A	non-processing					5211	\$ 211.00	
RETAIL FOOD - B	<200,000	5244	\$50.00	5248	\$55.00	5221/5225/5226/5227	\$ 316.00	
RETAIL FOOD - C	200,001-999,999	5245	\$75.00	5249	\$80.00	5222/5228/5229	\$ 661.00	
RETAIL FOOD - D	1,000,000-4,999,999	5246	\$100.00	5250	\$110.00	5223	\$ 864.00	
RETAIL FOOD - E	>5,000,000	5247	\$150.00	5251	\$165.00	5224	\$ 1,536.00	
		Total		Total		Total Plan/Pre-	insp.	

HEALTH DEPARTMENT MISC FEES

		PRE-INSP	PRE-INSP	LIC CHGE	LICENSE	
LICENSE TYPE	DESC	CODE	FEE	CODE	FEE	
HOTEL/MOTEL	5-30 rooms	5324	\$80.00	5312	\$ 251.00)
HOTEL/MOTEL	31-99 rooms	5325	\$110.00	5313	\$ 401.00	1
HOTEL/MOTEL	100+ rooms	5326	\$135.00	5314	\$ 543.00)
POOL/SEASONAL	per/pool	5419	\$135 ea.	5411	\$ 589.00)
POOL/YEAR ROUND	per/pool	5419	\$135 ea.	5412	\$ 812.00	1
WATER ATTRACTION-SEASONAL		5419	\$135 ea.	5413	\$ 644.00	1
WATER ATTRACTION-YEAR ROUND		5419	\$135 ea.	5414	\$ 864.00	1
WATER ATTRACTION-2 SLIDES		5419	\$135 ea.	5415	\$ 942.00	1
WATER ATTRACTIN-ADDITIONAL SLIDE		5419	\$135 ea.	5416	\$ 348.00	1
		Total		Total Pre-insp.		>
				TOTAL		

Applicant must contact the inspectors **AT LEAST 3 DAYS IN ADVANCE** to schedule inspections and obtain signatures. All fees are to be paid when applying. Please return this completed form with all signatures to the Customer Service Office to obtain license.

Inspector	Phone	Signature	Date
Health Inspector	715-839-4718		
Fire Inspector	715-839-4825		
Electric Inspector	715-839-4947		
Building Inspector	715-839-4947		
Plumbing Inspector	715-839-4947		

HEALTH DEPARTMENT PREINSPECTION FEE POLICY: The total preinspection fee for issuing multiple permits within the same establishment under the operation of the same operator/legal owner shall be determined by using the largest preinspection fee and assessing 75% of the preinspection fee of any additional permit(s).

04/14